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PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
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DEPARTACINATIONS DIVISION OF CORPORATIONS TALL ALL SSEE FLORIDA

O SIMMONS AUG 0 1 2018 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 326453 7458099

AUTHORIZATION: Spelle Relation

COST LIMIT : \$ 125-00

ORDER DATE : July 31, 2018

ORDER TIME : 9:53 AM

ORDER NO. : 326453-005

CUSTOMER NO: 7458099

FOREIGN_FILINGS

NAME: DAD 2605 N HIGHWAY Ala

MELBOURNE OWNER, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

COVER LETTER

TO:

	egistration Section ivision of Corporation	18					
IJECT	•	way A1A Melbourne Owner	, LLC				
	Name of Limited Liability Company						
enclos tence,	ed "Application by For and check are submitte	eign Limited Liability Comp d to register the above refer	pany for Authoriza enced foreign limit	ition to Tra	ansact Business in Florida," Certifica y company to transact business in Fl		
se retu	rn all correspondence	concerning this matter to the	following:				
	Jackie Gersten	eld					
		N	ame of Person				
	Driftwood Hos	pitality Management, LLC					
		Fi	irm/Company				
	11770 N US H	ighway I, Ste 202					
			Address				
	North Palm Be	North Palm Beach, FL 33408					
		City/S	tate and Zip Code	<u> </u>			
	jgerstenfeld@dh	mhotels.com					
		E-mail address: (to be use	d for future annual	report no	tification)		
further	information concerning	g this matter, please call:					
J;	ackie Gerstenfeld		561	207-27	78		
	Name o	of Contact Person	at (Area Code) Day	ytime Telephone Number		
D Re P.	IAILING ADDRESS: ivision of Corporation egistration Section O. Box 6327	•		Division Registrat Clifton B	-		
I i	allahassee, FL 32314				ecutive Center Circle see, FL 32301		
	s a check for the follow						
□ s	1\$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filir Certified Copy	ng Fee &	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

street address of Florida registered agent: (P.O. Box NOT acceptable) e: David Buddemeyer e Address: 11770 N. US Highway 1, Ste 202 North Palm Beach Florida 33408 (City) (City) this acceptance: named as registered agent and to accept service of process for the above stated limited liability company this application. I hereby accept the appointment as registered agent and agree to act in this capacity. In the provisions of all statutes relative to the proper and complete performance of my duties, and I am for the above stated limited liability company this applications of my position as registered agent. (Registered agent and address. (Registered agent and agent. (Registered agent and agent. (Registered agent and agent agent and agent agent and agent a			Charles The shares and find the state of the state of	Liability County ""LLC" or "LLC
the law of which foreign lumined liability company is organized) (Date first transacted humans in Florida, if proof to repartation) (Date first transacted humans in Florida, if proof to repartation) (See sections (30,000 & 603,000 &		sine adopted for the purpose of transacting business in		manning Company, C.C.C., or C.C.C.
plance and filling of this Application (Date first transacted biasters in Florida, if prace to regermentors) there Circle, Suite 760 (Stabling Address) coral Gables, FL 33134 Street address of Florida registered agent: (P.O. Box NOT acceptable) (Stabling Address) Coral Gables, FL 33134 Street address: 11770 N. US Highway 1, Ste 202 North Palm Beach (City) (City	Delaware	ab Commissed Liability accurately to presented)	J	umber if applicable)
(City) Separation of Florida registered agent: (P.O. Box NOT acceptable) David Buddemeyer e Address: David Buddemeyer e Address: David Buddemeyer e Address: David Buddemeyer (City) (Registered agent and to accept sepriment as registered agent and agree to act in this capacity. In the provisions of all statutes relative to the proper and complete performance of my duties, and I am for eabligations of my position as registered agent. (Carlos J. Rodriguez Carlos J. R	(Appreciation tanger the law of wr	near toreign intineer tailonity containly is organized;	(, 23.	, 11 spp. 12 sp. 1
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street address of Florida registered agent: (P.O. Box NOT acceptable) e: David Buddemeyer e Address: 11770 N. US Highway 1. Ste 202	(Street Address of F	Principal Office)	0	
In title or capacity and address of the person(s) who has/have authority to manage is/are: Name and Address: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Name and Address: Title or Capacity: Name and Address: Name and	Coral Gables, FL 3313	4	Coral Gables, FL 33134	
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Typed or printed name of signee



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "DAD 2605 N HIGHWAY A1A MELBOURNE

OWNER, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE

AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTY-FIRST DAY OF JULY,

A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DAD 2605 N HIGHWAY ALA MELBOURNE OWNER, LLC" WAS FORMED ON THE TENTH DAY OF MAY, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 203159467

Date: 07-31-18

6880596 8300 SR# 20185927245